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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/943,385	08/31/2001	Kohei Kato	381KA/50339	7752	

TITLÉ OF INVENTION: MULTI-LEAF COLLIMATOR AND MEDICAL SYSTEM INCLUDING ACCELERATOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300	\$1630	09/02/2004
EXA	MINER	ART UNI	T	CLASS-SUBCLASS]	
KIM, RICHARD H 287		2871		378-152000	_	
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☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				d the names of up to 2 regist or agents. If no name is liste inted.		

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Hitachi, Ltd.

Tokyo, Japan

Please check the appropriate assignee category	or categories (will not be printed on the patent);	☐ individual	₹ corporation or other private group entity	☐ governm		
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